

Fill in this information to identify your case:

Debtor 1 First Name	Zelda	Middle Name	D	Last Name	Green
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name	
United States Bankruptcy Court for the:			District of _____		
Case number (if known) _____					

15-11244
FILED
at 3 O'clock 806 min PM
Date 10/5/15

United States Bankruptcy Court
Augusta, Georgia

Check if this is:

An amended filing

A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

Employed
 Not employed

Employed
 Not employed

Occupation

Holiday COTTAGE

COTTAGE

Employer's name

Holiday COTTAGE

CDTAGE Childcare

Employer's address

2834 Milledgeville Rd

Milledgeville Rd

Number Street

Number Street

AUGUSTA, GA 30909

AUGUSTA, GA 30909

City State ZIP Code

City State ZIP Code

How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

2. \$ 1,000

3. + \$ 0.00

4. \$ 1,000

For Debtor 2 or non-filing spouse

\$ 733

+ \$ 0.00

\$ 733

Debtor 1

Zelca D. Green

First Name

Middle Name

Last Name

Case number (if known)

15-11244

For Debtor 1

For Debtor 2 or
non-filing spouse

Copy line 4 here..... → 4.

\$ 1,000 \$ 733

5. List all payroll deductions:

- 5a. Tax, Medicare, and Social Security deductions
 5b. Mandatory contributions for retirement plans
 5c. Voluntary contributions for retirement plans
 5d. Required repayments of retirement fund loans
 5e. Insurance
 5f. Domestic support obligations
 5g. Union dues
 5h. Other deductions. Specify: _____

5a. \$ 39.37	\$ _____
5b. \$ 0.00	\$ _____
5c. \$ 0.00	\$ _____
5d. \$ 0.00	\$ _____
5e. \$ 0.00	\$ _____
5f. \$ 0.00	\$ _____
5g. \$ 0.00	\$ _____
5h. + \$ 0.00	+ \$ _____

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.

6. \$ 0.00 \$ _____

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 420.00 \$ _____

8. List all other income regularly received:

- 8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ 0.00 \$ _____

- 8b. Interest and dividends

8b. \$ 0.00 \$ _____

- 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ 0.00 \$ _____

- 8d. Unemployment compensation

8d. \$ 0.00 \$ _____

- 8e. Social Security

8e. \$ 0.00 \$ _____

- 8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____

8f. \$ 0.00 \$ _____

- 8g. Pension or retirement income

8g. \$ 0.00 \$ _____

- 8h. Other monthly income. Specify: SSI FIN AN/SM

8h. + \$ 733 + \$ _____

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. \$ _____ \$ _____

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ _____ + \$ _____ = \$ 1,000

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____

11. + \$ _____

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12. \$ 1,000

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

 No.

 Yes. Explain: _____

15-11244

Fill in this information to identify your case:

Debtor 1 First Name	Zelba	Middle Name	D	Last Name	Green
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name	
United States Bankruptcy Court for the:			District of		
Case number (If known)					

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:
 MM / DD / YYYY
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

 No
 Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses

4.	\$ <u>308.00</u>
4a.	\$ <u>0.00</u>
4b.	\$ <u>0.00</u>
4c.	\$ <u>0.00</u>
4d.	\$ <u>0.00</u>

Debtor 1

Zelda D. Green

First Name Middle Name

Last Name

Case number (if known)

15-11244**Your expenses****5. Additional mortgage payments for your residence, such as home equity loans**

5. \$ _____

6. Utilities:

6a. Electricity, heat, natural gas

6a. \$ 100.00

6b. Water, sewer, garbage collection

6b. \$ 0.00

6c. Telephone, cell phone, Internet, satellite, and cable services

6c. \$ 33.006d. Other. Specify: Cell phone6d. \$ 100.00**7. Food and housekeeping supplies**7. \$ 60.00**8. Childcare and children's education costs**8. \$ 0.00**9. Clothing, laundry, and dry cleaning**9. \$ 28.00**10. Personal care products and services**10. \$ 0.00**11. Medical and dental expenses**11. \$ 0.00**12. Transportation. Include gas, maintenance, bus or train fare.**12. \$ 30.00

Do not include car payments.

13. \$ 0.00**13. Entertainment, clubs, recreation, newspapers, magazines, and books**13. \$ 0.00**14. Charitable contributions and religious donations**14. \$ 0.00**15. Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. \$ 0.00

15b. Health insurance

15b. \$ 0.00

15c. Vehicle insurance

15c. \$ 100.00

15d. Other insurance. Specify: _____

15d. \$ 0.00**16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.**16. \$ 0.00

Specify: _____

17. Installment or lease payments:17a. \$ 0.00

17b. Car payments for Vehicle 1

17b. \$ 0.00

17c. Car payments for Vehicle 2

17c. \$ 0.00

17d. Other. Specify: _____

17d. \$ 0.00

17e. Other. Specify: _____

17e. \$ 0.00**18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6i).**18. \$ 0.00**19. Other payments you make to support others who do not live with you.**19. \$ 0.00

Specify: _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.20a. \$ 0.00

20b. Mortgages on other property

20b. \$ 0.00

20c. Real estate taxes

20c. \$ 0.00

20d. Property, homeowner's, or renter's insurance

20d. \$ 0.00

20e. Maintenance, repair, and upkeep expenses

20e. \$ 0.00

20f. Homeowner's association or condominium dues

20f. \$ 0.00

Debtor 1
First Name _____ Middle Name _____ Last Name _____Case number (*if known*) _____21. Other. Specify: Rent21. +\$ 3.08

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ 535

23. Calculate your monthly net income.

23a. \$ 1,00023b. -\$ 84323c. \$ 157

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No.
 Yes. Explain here:

In re _____,
Debtor

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 10-5-2015

Signature: Bulka W. Green
Debtor

Date _____

Signature: _____
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address _____

X _____
Signature of Bankruptcy Petition Preparer

Date _____

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.